

Understanding Behavior from a “Sensation” Point of View:

Sensory Processing Behavior in Children

We all process information from the world through our sensory systems. For some of us, and many children, our sensations create challenges that affect our ability to focus, learn, and cope with family, friends, or school life. This presentation will help you identify behaviors that are driven by a disordered sensory system and what to do about it. Strategies will be presented and you will have an opportunity to create a sensory program specific for your child or a child you work with.

Workshop Objectives

This workshop will use concepts from sensory processing theory and the zone of proximal development to address:

- The continuum of sensory processing
 - (under → “just right” → over).
- Behaviors which indicate sensory processing differences in the seven sensory systems.
- Strategies for regulation.
- How to create realistic expectations for your child.
- How to plan for sensory strategies proactively during the day.

Who Should Attend?

- Family members or caregivers involved with a child with challenging behaviors or sensory processing differences.
- Professionals or support staff involved with children that experience sensory processing issues such as a therapist, social worker, psychologist, educational assistant, teacher, daycare staff or respite worker.

About the Presenter

Leah Zajic is an occupational therapist who works in private practice and in the school system. She has many years of experience working with children with sensory regulation challenges. Leah also has training in the Integrated Listening Systems approach.

Date, Time and Location

Date: Saturday, March 1, 2014

Time: 9:30 to 3:30 p.m.

Cost: \$115.00 before February 21
\$125.00 after February 22
(cost includes lunch)

Location: Discoveries in Therapy,
468 Academy Road, Winnipeg

Presenter:

Leah Zajic OT Reg. (MB)

Registration:

* Fax form to 204-253-6105

* Phone: 204-254-3146

*Email:

rosanne@discoveriesintherapy.com

Name: _____

Circle One: parent or professional

Phone: _____

Email: _____

Allergies or dietary needs:-

Payment:

Make cheques payable to:
Discoveries in Therapy
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